UNITED STATES DISTRICT COURT

	for the				
	District of Maryland				
GILEAD SCIENCE GILEAD SCIENCES IR					
Plaintiff(s v. MERITAIN HEALTI)	Civil Action No.			
Defendant()				
SUMMONS IN A CIVIL ACTION					
To: (Defendant's name and address)	Gregory P. Santulli 2365 Bellefonte Avenue Lawrenceville, GA 30043				
A lawsuit has been file	ed against you.				
are the United States or a United P. 12 (a)(2) or (3) — you must	ed States agency, or an officer or serve on the plaintiff an answer	not counting the day you received it) — or 60 days if you employee of the United States described in Fed. R. Civ. to the attached complaint or a motion under Rule 12 of ust be served on the plaintiff or plaintiff's attorney,			
If you fail to respond, You also must file your answer		red against you for the relief demanded in the complaint.			
		CLERK OF COURT			
Date:					
		Signature of Clerk or Deputy Clerk			

Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (name	ne of individual and title, if any)				
was re	ceived by me on (date)	·				
	☐ I personally served	the summons on the individual	at <i>(place)</i>			
			on (date)			
	☐ I left the summons	at the individual's residence or u	usual place of abode with (name)			
	, a person of suitable age and discretion who reside					
	on (date)	, and mailed a copy to the individual's last known address; or				
	\square I served the summons on (name of individual)					
	designated by law to	accept service of process on beh	alf of (name of organization)			
			on (date)	; or		
	☐ I returned the summ	mons unexecuted because		; or		
	☐ Other (specify):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
	I declare under penalty	y of perjury that this information	is true.			
Date:						
Date.			Server's signature			
			Printed name and title			
			Server's address			

Additional information regarding attempted service, etc: